### **Supplementary materials**

#### **Disclaimer**

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#### S1: Additional information on the study setting

#### Study area

With 3.7 million inhabitants, Berlin is the most densely populated state in Germany. Physicians and laboratories notify clinically suspect and laboratory-confirmed cases of COVID-19 directly to the local health authority (LHA) of residence of the case. With a population of 370,000, Mitte is the district with the second largest population in the state [1].

#### Public health activities on COVID-19 in the study area

First cases of COVID-19 were reported to the LHA in Mitte district in the beginning of March 2020. In accordance with the recommendations by the German national public health institute (Robert Koch Institute, RKI), a case was defined as a person with detection of SARS-CoV-2 by PCR in nasopharyngeal or oropharyngeal swab or any other body fluid. Initial exploratory interviews with cases were conducted by the LHA by telephone to assess details on contact persons, potential exposures, risk factors of infection, onset and prevalence of symptoms. At the time of sampling, home isolation of cases was required for a period of at least 14 days. Cases could end the isolation period if they were symptom-free for a minimum of two consecutive days at the end of the initial 14 days.

#### Public health testing recommendations during the study period

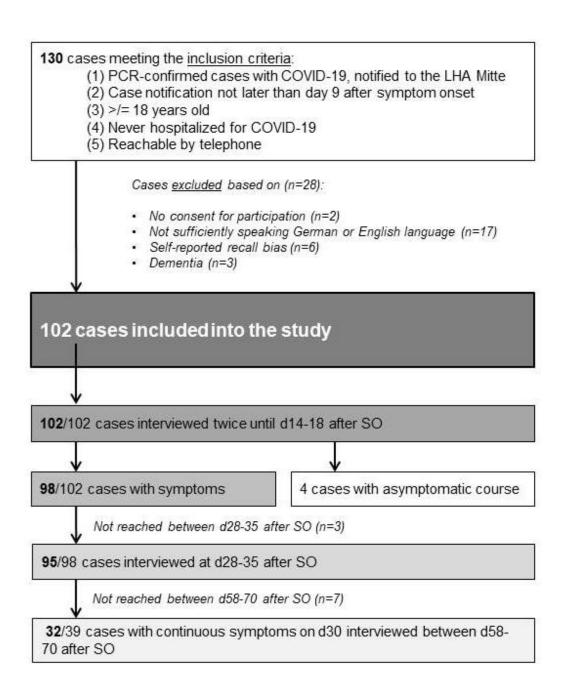
The testing strategy as recommended by Robert Koch Institute (RKI) changed during the study period. From the beginning of the study up to early May, testing for symptomatic patients lacking a known contact to a laboratory confirmed case was only recommended as part of a differential diagnostic work-up, especially for medical staff or patients with known risk factors for a fulminant disease course. Since early May, 2020, testing was expanded to all symptomatic patients including patients presenting with dysosmia or dysgeusia, regardless of their epidemiological link, their occupational activity or their pre-existing condition. Testing was always free of charge (2).

#### References

- 1. Statistischer Bericht A I 5 hj 1 / 17, Einwohnerinnen und Einwohner im Land Berlin am 30. Juni 2017. 2017, Amt für Statistik Berlin-Brandenburg: Potsdam.
- 2. Robert Koch Institute: COVID-19 Verdacht: Testkriterien und Maßnahmen (Testing criteria and measures in pressumed COVID-19 cases). Available on:

  https://www.rki.de/DE/Content/InfAZ/N/Neuartiges\_Coronavirus/Massnahmen\_Verdachtsfall\_Infografik\_DINA
  3.pdf? blob=publicationFile

## S2: Flowchart depicting inclusion criteria and number of cases interviewed, Berlin, Germany, March to May 2020



#### Legend:

Sampling period from March 30, 2020 to April 9, 2020 and April 13, 2020 to May 20, 2020 SO = symptom onset

S3: Investigation form (day 1-18, day 30) to assess symptom duration in COVID-19 patients, Berlin, Germany, March to May 2020. The investigation form was in German as telephone interviews were conducted in German. To facilitate interpretation for non-German readers we have labelled the form. Section (A) asks about personal information of the patient (name, date of birth, telephone number). Section (B) refers to demographic, smoking and anthropometric information. Section (C) is for the initials of the interviewer by interview data as well as the exact date of the interview. Section (D) records any comorbidities and use of medication. Section (E) collects information on presence/absence of symptoms (rows) by time (columns) as well as symptom severity for some symptoms. Section (F) ask about hospitalisation, duration and name of the hospital.

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### S4: Applied definitions of symptoms in COVID-19 patients, Berlin, Germany, March to May 2020

Symptom:	Definition:
Fever	Self-reported OR measured body temperature =/>38,0°C at least once
Antpyretic agent	Acetylsalicylic acid, ibuprofene, diclofenac, acetaminophen, metamizole, etc.
Chills and rigor	Chills and rigor affecting the whole body
Cough	In chronic cough: increase in the frequency or change in the quality of the cough
Sore throat	Sore throat OR pain while speaking or swallowing
Hoarseness	Voice strongly weakened
Rhinitis	Catarrh ("stuffy nose") with OR without secretion, if both are present the more prominent symptom
Dyspnea	Shortness of breath (independent of stuffy nose)
Headache	
Back pain	
Chest pain	Pleuritic pain (breath-related pain) OR tightness of the chest on exertion OR feeling of pressure on the chest
Joint pain	
Abdominal pain	
Changes in bowel habit, diarrhoea	Loose stools independent of frequency
Nausea	
Vomiting	
Fatigue	Extreme tiredness or need for sleep without any sleep deficit and no improvement after sleep
Listlessness	Loss of drive
Dysosmia	Impairment of the sense of smell (independent of stuffy nose)
Dysgeusia	Impairment of at least one of the taste modalities: sweetness, sourness, saltiness, bitterness, savoriness (umami)
Muscle pain	
Numbness of upper and/or lower	Decrease or loss of sensation in upper AND/OR lower limbs
limbs	
Skin rash	
Conjunctivitis	Prolonged redness of the eyes
Hyperaesthesia	Severe hypersensitivity of the skin (e.g. sunburn-like feeling)
Reduced physical performance	Decrease in physical AND/OR psychological performance in comparison to before COVID-19
capacity	

## S5: Difference between sexes in COVID-19 symptoms, Berlin, Germany, March to May 2020

		Day 1-14			Day 30			Day 60		
Symptoms	Female N = 57	<b>Male</b> N = 41	P- value	Female N = 55	<b>Male</b> N = 40	P- value	<b>Female</b> N = 53	<b>Male</b> N = 35	P- value	
Malaise	54 (95%)	38 (93%)	0.7	6 (11%)	1 (2.5%)	0.2	3 (5.7%)	0 (0%)	0.4	
Headache	44 (77%)	26 (63%)	0.2	5 (9.1%)	1 (2.5%)	0.4	2 (3.8%)	0 (0%)	0.7	
Rhinitis	39 (68%)	29 (71%)	>0.9	2 (3.6%)	1 (2.5%)	>0.9	2 (3.8%)	0 (0%)	0.7	
Muscle pain	39 (68%)	25 (61%)	0.6	0 (0%)	0 (0%)	-	1 (1.9%)	0 (0%)	>0.9	
Cough	36 (63%)	27 (66%)	>0.9	7 (13%)	4 (10%)	0.8	2 (3.8%)	1 (2.9%)	>0.9	
Dysosmia	34 (60%)	25 (61%)	>0.9	14 (25%)	7 (18%)	0.5	9 (17%)	3 (8.6%)	0.4	
Fatigue	32 (56%)	21 (51%)	0.8	3 (5.5%)	2 (5.0%)	>0.9	3 (5.7%)	0 (0%)	0.4	
Sore throat	28 (49%)	19 (46%)	>0.9	3 (5.5%)	0 (0%)	0.3	1 (1.9%)	0 (0%)	>0.9	
Dysgeusia	31 (54%)	14 (34%)	0.075	5 (9.1%)	3 (7.5%)	>0.9	3 (5.7%)	2 (5.7%)	>0.9	
Fever	22 (39%)	16 (39%)	>0.9	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	-	
Back pain	22 (39%)	14 (34%)	0.8	3 (5.5%)	0 (0%)	0.3	1 (1.9%)	0 (0%)	>0.9	
Chills	16 (28%)	15 (37%)	0.5	3 (5.5%)	0 (0%)	0.3	2 (3.8%)	1 (2.9%)	>0.9	
Dyspnea	17 (30%)	11 (27%)	>0.9	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	-	
Nausea	22 (39%)	5 (12%)	0.008	1 (1.8%)	0 (0%)	>0.9	1 (1.9%)	0 (0%)	>0.9	
Diarrhoea	13 (23%)	14 (34%)	0.3	2 (3.6%)	0 (0%)	0.5	0 (0%)	0 (0%)	-	
Joint pain	10 (18%)	10 (24%)	0.6	0 (0%)	0 (0%)	-	1 (1.9%)	0 (0%)	>0.9	
Abdominal pain	11 (19%)	6 (15%)	0.7	1 (1.8%)	0 (0%)	>0.9	0 (0%)	0 (0%)	-	
Chest tightness	12 (21%)	4 (9.8%)	0.2	3 (5.5%)	0 (0%)	0.3	1 (1.9%)	0 (0%)	>0.9	
Listlessness	12 (21%)	4 (9.8%)	0.2	2 (3.6%)	0 (0%)	0.5	0 (0%)	0 (0%)	-	
Hyperesthesia	10 (18%)	7 (17%)	>0.9	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	-	
Pleuritic pain	7 (12%)	2 (4.9%)	0.3	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	-	
Hoarseness	5 (8.8%)	3 (7.3%)	>0.9	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	-	
Rash	4 (7.0%)	2 (4.9%)	>0.9	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	-	
Vomiting	4 (7.0%)	2 (4.9%)	>0.9	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	-	
Chest pain, unspecific	3 (5.3%)	2 (4.9%)	>0.9	1 (1.8%)	0 (0%)	>0.9	0 (0%)	0 (0%)	-	
Numbness	3 (5.3%)	2 (4.9%)	>0.9	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	-	
Conjunctivitis	1 (1.8%)	2 (4.9%)	0.6	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	-	

# S6: Proportion of COVID-19 patients at day 30 and day 60 after symptom onset who had symptoms already experienced prior, Berlin, Germany, March to May 2020

	Day 30	Day 60
Symptoms:	N = 39	N = 18
Abdominal pain	1 (100%)	0 (0%)
Back pain	3 (100%)	1 (100%)
Chest tightness	3 (100%)	1 (100%)
Chest pain, unspecific	0 (0%)	0 (0%)
Rhinitis	3 (100%)	2 (100%)
Cough	10 (91%)	3 (100%)
Diarrhoea	2 (100%)	0 (0%)
Dysgeusia	8 (100%)	4 (80%)
Dysosmia	20 (95%)	12 (100%)
Dyspnea	1 (33%)	2 (67%)
Fatigue	5 (100%)	3 (100%)
Listlessness	1 (50%)	0 (0%)
Headache	6 (100%)	2 (100%)
Joint pain	0 (0%)	0 (0%)
Malaise	7 (100%)	3 (100%)
Muscle pain	0 (0%)	0 (0%)
Nausea	1 (100%)	1 (100%)
Sore throat	3 (100%)	0 (0%)